#### Application Data Sheet

Application Information

Application Type:: National Stage

Subject Matter:: Utility

Suggested Classification::
Suggested Group Art Unit::

CD-ROM or CD-R?:: None

Number of CD disks::

Number of Copies of CDs::

Sequence Submission?:: None

Computer Readable Form (CRF):: No

Number of copies of CRF:: 0

Title:: METHOD FOR PREPARING A DAIRY

PRODUCT

Attorney Docket Number:: 0508-1169

Request for Early No

Publication?::

Request for Non-Publication?:: No

Suggested Drawing Figure::

Total Drawing Sheets:: 7

Small Entity?:: No

Latin Name::

Variety Denomination Name::

Petition Included?:: No

Petition Type::

Licensed US Gov't Agency::

Contract or Grant Numbers::

Secrecy Order in Parent No

Appl.?::

Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country:: FRANCE

Status:: Full Capacity

Given Name:: STEPHANE

Middle Name::

Family Name:: DOAT

Name Suffix::

City of Residence:: LA VILLE DU BOIS

State or Province of

Residence::

Country of Residence:: FRANCE

Street of Mailing 6, ALLEE DES MESANGES

Address::

City of Mailing Address:: LA VILLE DU BOIS

State or Province of Mailing Address::

Country of Mailing Address:: FRANCE

Postal or Zip Code of Mailing Address:: F-91620

Applicant Authority Type:: Inventor

Primary Citizenship Country:: SPAIN

Status:: Full Capacity

Given Name:: ELENA

Middle Name::

Family Name:: VELA ROCA

Name Suffix::

City of Residence:: BARCELONA

State or Province of

Residence::

Country of Residence:: SPAIN

Street of Mailing CALLE GOLF DE BISCAIA, 42

Address:: SANT CUGAT DEL VALLES

City of Mailing Address:: BARCELONA

State or Province of Mailing Address::

Country of Mailing Address::

SPAIN

Postal or Zip Code of Mailing Address:: E-08190

Applicant Authority Type::

Inventor

Primary Citizenship Country::

SPAIN

Status::

Full Capacity

Given Name::

AGUSTI

Middle Name::

Family Name::

MONTSERRAT CARRERAS

Name Suffix::

City of Residence::

BARCELONA

State or Province of

Residence::

Country of Residence::

SPAIN

Street of Mailing

CARRETERA SANT ANTONI VILAMAJOR, 43

Address::

LLINARS DEL VALLES

City of Mailing Address::

BARCELONA

State or Province of Mailing Address::

Country of Mailing Address::

SPAIN

Postal or Zip Code of Mailing Address:: E-08450

Applicant Authority Type::

Inventor

Primary Citizenship Country::

ARGENTINA

Status::

Full Capacity

Given Name::

RICARDO

Middle Name::

Family Name::

WEILL

Name Suffix::

City of Residence::

BUEONOS AIRES

State or Province of

Residence::

Country of Residence::

ARGENTINA

Street of Mailing

EMILIO MITRE 279

Address::

VILLA SARMIENTO

City of Mailing Address::

BUEONOS AIRES

State or Province of Mailing Address::

Country of Mailing Address::

ARGENTINA

Postal or Zip Code of Mailing Address:: AR-1706

Applicant Authority Type::

Inventor

Primary Citizenship Country::

FRANCE

Status::

Full Capacity

Given Name::

CLAUDE EMMANUELLE

Middle Name::

Family Name::

GASPARD

Name Suffix::

City of Residence::

PARIS

State or Province of

Residence::

Country of Residence:

FRANCE

Street of Mailing 98, RUE DE LA CROIX NIVERT

Address::

City of Mailing Address::

PARIS

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address:: F-75015

Applicant Authority Type::

Inventor

Primary Citizenship Country::

FRANCE

Status::

Full Capacity

Given Name::

BERNARD

Middle Name::

Family Name::

ROBINE

Name Suffix::

City of Residence::

LES PLESSIS ROBINSON

State or Province of

Residence::

Country	$\sim$ f	Residence::	
Country	$O_{T}$	Vesidence	

FRANCE

Street of Mailing 3, RUE DU CARREAU

Address::

City of Mailing Address:: LES PLESSIS ROBINSON

State or Province of Mailing Address::

Country of Mailing Address:: FRANCE

Postal or Zip Code of Mailing Address:: F-92350

## Correspondence Information

Correspondence Customer

00466

Number::

### Representative Information

Representative Customer	00466
Number::	

### Domestic Priority Information

Application::	Continuity	Parent	Parent Filing
	Type::	Application::	Date::
This application	National Stage of	PCT/FR2005/000203	2/1/05

## Foreign Priority Information

Country::	Application	Filing Date::	Priority
	Number::		Claimed::
FRANCE	04/01513	2/16/04	Yes
			·

# Assignment Information

Assignee Name::

Street of Mailing

Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::